

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>CS</i>	<i>7025</i>	<i>10-31-00</i>
O.I.P.E. CLASSIFIER		<i>7</i>	<i>10-31-00</i>
FORMALITY REVIEW	<i>M.H.</i>	<i>625</i>	<i>10-31-00</i>
RESPONSE FORMALITY REVIEW	<i>At</i>	<i>907</i>	<i>1-29-01</i>

INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
+	Restricted	O	Objected

Claim	Date
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions
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